

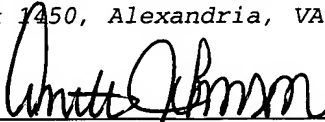
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PATENT



**IN THE UNITED STATES PATENT AND TRADEMARK OFFICE**

I hereby certify that this correspondence is being deposited with the U.S. Postal Service as first class mail in an envelope addressed to Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450 on July 26, 2004.

  
Anita Johnson

Appl No. : 10/758,985 Confirmation No. 7902  
Applicant : Karl Josephy, et al.  
Filed : January 16, 2004  
Title : PROCESS FOR MAKING ANGSTROM SCALE AND HIGH ASPECT  
FUNCTIONAL PLATELETS  
TC/A.U. : 1732  
Examiner : To be assigned  
Docket No. : 51426/WGM/A23  
Customer No. : 23363

**PRELIMINARY AMENDMENT**

Mail Stop Amendment  
Commissioner for Patents  
P.O. Box 1450  
Alexandria, VA 22313-1450

Post Office Box 7068  
Pasadena, CA 91109-7068  
July 26, 2004

Commissioner:

Please amend the above-identified application before the first Office action as follows:

**Amendments to the Claims** are reflected in the listing of claims which begins on page 2 of this paper.

**Remarks/Arguments** begin on page 10 of this paper.

08/18/2004 BSAYAS11 00000063 10758985

01 FC:1201 86.00 OP  
02 FC:1202 90.00 OP

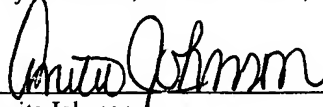
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AUG 18 2004  
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IN THE UNITED STATES PATENT AND TRADEMARK OFFICE  
PRELIMINARY AMENDMENT TRANSMITTAL LETTER

I hereby certify that this correspondence is being deposited with the U.S. Postal Service as first class mail in an envelope addressed to Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450 on July 26, 2004.

  
Anita Johnson

Applicant : Karl Josephy, et al.  
Application No. : 10/758,985  
Filed : January 16, 2004  
Title : PROCESS FOR MAKING ANGSTROM SCALE AND HIGH ASPECT  
FUNCTIONAL PLATELETS

Grp./Div. : 1732  
Examiner : To be assigned

Docket No. : 51426/WGM/A23

Commissioner for Patents  
P.O. Box 1450  
Alexandria, VA 22313-1450

Post Office Box 7068  
Pasadena, CA 91109-7068  
July 26, 2004

Commissioner:

Enclosed is an amendment to the above-identified application.

CLAIMS AS AMENDED						
	Claims Remaining After Amendment	Highest Number Paid For	Number Extra Claims	Small Entity Rate	Large Entity Rate	FEE
Total Claims Fee	25	*20	5	x \$9.00	5 x \$18.00	\$90
Independent Claims	4	** 3	1	x \$43.00	1 x \$86.00	\$86
Multiple Dependent Claims ***				\$145.00	\$290.00	
TOTAL FILING FEE						\$176
NO ADDITIONAL FEE REQUIRED ****	IF NO FEE REQUIRED, INSERT "0"					
LIST INDEPENDENT CLAIMS: 1, 9, 12, 23						
* IF HIGHEST NUMBER PREVIOUSLY PAID FOR IS 20 OR LESS, WRITE "20" IN COLUMN 3 ** IF HIGHEST NUMBER PREVIOUSLY PAID FOR IS 3 OR LESS, WRITE "3" IN COLUMN 3 *** PAY THIS FEE ONLY WHEN MULTIPLE DEPENDENT CLAIMS ARE ADDED FOR THE FIRST TIME **** IF NO FEE REQUIRED, ADDRESS ENVELOPE TO "BOX NON-FEE AMENDMENTS"						

X \_\_\_\_\_  
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Attached is our check for \$176 to pay the fees calculated above.  
A Petition for Extension of Time and the required fee are enclosed.

**Amendment Transmittal Letter**  
**Application No. 10/758,985**

\_\_\_\_\_ Other enclosures:

The Commissioner is hereby authorized to charge any fees under 37 CFR 1.16 and 1.17 which may be required by or to give effect to this paper to Deposit Account No. 03-1728. Please show our docket number with any charge or credit to our Deposit Account. **A copy of this letter is enclosed.**

Respectfully submitted,

CHRISTIE, PARKER & HALE, LLP

By



Walter G. Maxwell

Reg. No. 25,355

626/795-9900

WGM/agj

AGJ PAS576225.1-\*07/23/04 5:18 PM